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FACSIMILE TRANSMITTAL

TO:	FROM:
Name: Mail Stop AMENDMENT Group Art Unit 3738/Examiner David Isabella	Name: Amedeo F. Ferraro, Esq.
Firm: U.S. Patent & Trademark Office	Phone No.: 310-286-9800
Fax No.: 571-273-8300	No. of Pages (including this): 28
Subject: U.S. Patent Application No. 10/697,835 Gary K. Michelson Filed: October 30, 2003 ORTHOPEDIC IMPLANT SURFACE CONFIGURATION WITH A PROJECTION HAVING A BACK CUT Attorney Docket No. 101.0094-01000 Customer No. 22882 Confirmation No.: 9278	Date: July 27, 2006 Confirmation Copy to Follow: NO

Message:**CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

I hereby certify that the attached Transmittal Form (in duplicate; \$120.00 total amount to cover the one-month extension fee is to be charged to Deposit Account No. 50-3726) and Amendment are being facsimile transmitted to the U.S. Patent and Trademark Office on July 27, 2006.


Sandra L. Blackmon

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FORM PTO-1083

Attorney Docket No.: 101.0094-01000
Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary K. Michelson

Serial No: 10/697,835

Filed: October 30, 2003

For: ORTHOPEDIC IMPLANT SURFACE
CONFIGURATION WITH A PROJECTION
HAVING A BACK CUT

Confirmation No.: 9278

Art Unit: 3738

Examiner: David Isabella

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JUL 27 2006Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a reply to the Office Action dated June 7, 2006 in the above-identified application.

- ☐ No additional fee is required.
- ☒ Applicant hereby requests a one-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	228	-	228	0	LG=\$50 SM=\$25	\$50
INDEPENDENT CLAIMS FEE	5	-	5	0	LG=\$200 SM=\$100	\$200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$0
TOTAL						\$0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ The total amount of \$120.00 to cover the one-month extension of time fee is to be charged to Deposit Account No. 50-3726.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-3726. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
MARTIN & FERRARO, LLPBy: Amedeo F. Ferraro
Registration No. 37,129

Date: July 27, 2006

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01 FC:1251 120.00 DA

PATENT
Attorney Docket No. 101.0094-01000
Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Gary K. Michelson)
Serial No.: 10/697,835)
Filed: October 30, 2003)
For: ORTHOPEDIC IMPLANT SURFACE)
CONFIGURATION WITH A)
PROJECTION HAVING A BACK CUT)

Confirmation No.: 9278

Group Art Unit: 3738

Examiner: David J. Isabella

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JUL 27 2006

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT

In reply to the Restriction Requirement dated June 7, 2006, the period for reply having been extended for one month by a request for extension and fee payment filed concurrently herewith, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 25 of this paper.

Amendment 7-27-06.doc